IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	Atty	BJS-4984-7					
	Dkt.	C#	M#	ATTACHMENTS:			
Catharina SVANBORG	TC/A.U.	1656		(1) Amendment; and (2) IDS, PTO-1449 Form	. /7	pages)	
Serial No. 10/590,938	Examiner:	DESA	, Anand U	and cited references	1 (7	pages)	
Filed: August 28, 2006	Date:	June 2	6, 2009				
Title: LACTALBUMIN FOR INHIBITING ANGIOGENESIS							
Commissioner for Patents							
P.O. Box 1450 Alexandria, VA 22313-1450							
Sir: RESPONSE/AMENDMENT/LETTER							
This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby							
incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.							
☐ Correspondence Address Indi	cation Forn	n Atta	ched.				
Fees are attached as calculated below:							
Total effective claims after amendment previously paid for 20 (at least 2		highest < \$52.0	number 0	\$208.00 (1202)/\$104.00 (2202)	\$	208.00	
Independent claims after amendment previously paid for 4 (at least 3)		highest < \$220.	number 00	\$0.00 (1201)/\$0.00 (2201)	\$	0.00	
If proper multiple dependent claims now added for first time, (ignore improper); add							
\$390.00 (1203)/\$195.00 (2203) \$390.00 Petition is hereby made to extend the current due date so as to cover the filing date of this							
paper and attachment(s) One Month Extension \$130.00 (1251)/\$65.00 (2251)							
				490.00 (1252)/\$245.00 (2252) I 110.00 (1253/\$555.00 (2253)			
Four Month Extensions \$1730.00 (1254/\$865.00 (2254)						400.00	
Terminal disclaimer enclosed, add	Five IV	ionth Ex			_	490.00	
Applicant claims "small entity" status.	☐ Statemer	nt filed h		\$140.00 (1014)/ \$70.00 (2014) · 3	\$	0.00	
Rule 56 Information Disclosure Statement F		it illou i	CICWILII	\$180.00 (1806)	\$	180.00	
	iiiig i ee			, ,			
Assignment Recording Fee Other:				, ,	\$ \$	0.00 0.00	
Outer.	TOTAL F	EE DAI	N EL ECTP			1268.00	
TOTAL FEE PAID ELECTRONICALLY BY CREDIT CARD \$ 1268.00 CREDIT CARD PAYMENT FORM ATTACHED.							
The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.							
901 North Glebe Road, 11 th Floor	NIX	NIXON & VANDERHYE P.C.					
Arlington, Virginia 22203-1808	By A	By Atty: B. J. Sadoff, Reg. No. 36,663					
Telephone: (703) 816-4000 Facsimile: (703) 816-4100							
BJS:pp	Sigr	nature:		/B. J. Sadoff/			